

Letter to the Editor (Matters arising from published papers)

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Comment on: Equal rights in autoimmunity: is Sjögren's syndrome ever 'secondary'? reply

DEAR EDITOR, We thank Alunno and colleagues for their interest in our review [1] and for the data they present that support a lack of distinction between Sjögren's syndrome (SS) occurring in isolation and SS associated with the presence of other autoimmune rheumatic diseases. We strongly encourage further comparative research, including at the single cell level, to further establish the similarities of SS occurring in these different settings, or else provide a more concrete rationale than currently exists for the widely held distinction between 'primary' and 'secondary' disease.

We also agree with Alunno *et al.* that the evaluation of SS in RA and SLE trials is likely to provide valuable insights into potential therapies for SS, and we argued in our review that the absence of such an evaluation has been a missed opportunity. While we are enthusiastic about the role of histology as a classifier and outcome measure in SS [2], we are doubtful that biopsy could be effectively implemented in a large multicentre trial of a non-SS autoimmune rheumatic disease. However, evaluation at screening of anti-Ro antibodies alongside tear and salivary flow assessment in symptomatic patients, might be feasible. Subsequent objective glandular function tests and symptomatic assessments could be performed as response measures in the subset with anti-Ro positive SS. At present there are no approved systemic immunomodulatory therapies for SS and we should leverage opportunities to improve care for this too often neglected group of patients.

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- 2 Fisher BA, Jonsson R, Daniels T *et al.* Standardisation of labial salivary gland histopathology in clinical trials in primary Sjögren's syndrome. *Ann Rheum Dis* 2017;76:1161–8.